

HAZARD & RISK REGISTER



This form is to be used to enter all existing, new and controlled hazards and risks requiring continuous or further action(s) to manage.

RISK MATRIX			Consequence (severity)				
			1	2	3	4	5
			Insignificant <small>Trivial injury No treatment / in-house first aid</small>	Minor <small>Minor injury/illness/damage (<1 day off work)</small>	Moderate <small>Significant injury/illness/damage (1-5 days off work)</small>	Major <small>Extensive permanent injury/illness/damage (>5 days off work)</small>	Catastrophic <small>Death/permanent disabling injury</small>
Likelihood	5	Almost certain to occur in most circumstances <i>(daily-weekly)</i>	(5) Medium	(10) High	(15) Extreme	(20) Extreme	(25) Extreme
	4	Likely to occur frequently <i>(monthly)</i>	(4) Medium	(8) High	(12) High	(16) Extreme	(20) Extreme
	3	Likely to occur at some time <i>(yearly)</i>	(3) Low	(6) Medium	(9) High	(12) High	(15) Extreme
	2	Unlikely to occur, but could happen <i>(2 yearly)</i>	(2) Low	(4) Low	(6) Medium	(8) High	(10) High
	1	May occur, but only in exceptional circumstances <i>(every few years)</i>	(1) Low	(2) Low	(3) Low	(4) Medium	(5) Medium

WORKSITE:
LOCATION/AREA:

Hazard / Risk / Issue No.	Source & Reference <i>(e.g. Inspection, Hazard or Incident Report)</i>	Date Identified or Last Review	Hazard / Risk / Issue	Risk Rating before controls actioned (E/H/M/L)	Current Controls	Further Controls / Actions Required	Risk Rating after controls actioned (E/H/M/L)	Person/s Responsible	Date Completed & Signature	Review Date or Schedule <i>(if applicable)</i>

